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14. ABSTRACT The purpose of this study is to understand the recently documented increase in rates of child maltreatment and neglect in the US Army. The project employs a three prong research methodology (using clinical chart reviews, survey methodology of key informants, and demographic community analyses) to: 1) facilitate understanding of the phenomenology of Army child neglect, 2) identify child, parent, and family risk and protective factors that contribute to neglect, 3) identify military community contributions to neglect, including deployment, and 4) identify surrounding community factors that may also contribute risk or protection to child neglect behaviors.					
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SECTION I: INTRODUCTION

With the collective efforts of the research team, significant progress has been made during the past year. Activities have occurred with each of the three Prongs (A, B and C), culminating in the collection of data at 26 Army installations across the United States. The accomplishments include obtaining institutional review board approval for each of the Prongs (A, B and C).

As a result of these efforts, the following tasks have been completed:

- Data from 300 closed and substantiated child neglect records has been collected for Prong A (Ft. Drum, Ft. Stewart and Ft. Bragg);
- Ninety (90) questionnaires have been completed telephonically with Army Community Services (ACS) staff and/or other service providers at six installations (Ft. Polk, Ft. Meade, Ft. Carson, Ft. Wainwright, Ft. Irwin, and Ft. Huachuca) for Prong B;
- A total of 168 electronic questionnaires have been completed by ACS staff affiliated with 15 installations (Ft. Benning, Ft. Bliss, Ft. Campbell, Ft. Gordon, Ft. Jackson, Ft. Knox, Ft. Lee, Ft. Leonard Wood, Ft. Riley, Ft. Rucker, Ft. Sam Houston, Ft. Sill, Joint Bases at Lewis McChord and San Antonio, and Shofield Barracks).
- In-person questionnaires were completed at Ft. Hood, Ft. Bragg, and Ft. Drum, totaling 285 questionnaires from voluntary participants at the commissary and 246 questionnaires with ACS staff;
- A preliminary review of community resources has been completed for Prong C.

BODY

Tasks expected as identified in the SOW

- 1. Program personnel recruitment and hiring:** To reflect staff changes, new additions and deletions were made to the protocol and IRB approved personnel list. For Prong A, Ft. Drum's site collaborator was changed from Donald Mott to Todd Benham.

Previous language indicated that FAP personnel at Ft. Bragg, Ft. Hood, Ft. Stewart and Ft. Drum were to distribute and/or collect questionnaires; however, in November 2010, this was deleted from their roles and became the responsibility of the research staff.

- 2. Organization and preparation:** An "Institutional Agreement for IRB Review (IAIR)" was initiated and approved (July 2011) between USUHS and Darnall Army Medical Center (BAMC IRB) for Prong A. Approval for Prongs B and C were received from the USUHS IRB and Human Protection Office (HRPO), Office of Research Protections (ORP), U.S. Army Medical Research & Material Command (USAMRMC) in November 2011.

In July 2011, USUHS approved an "Application for Waiver Authorization" for Prong A of the study; data will be collected from closed substantiated child neglect cases at four installations (Ft. Drum, Ft. Stewart, Ft. Bragg and Ft. Hood). During this same timeframe, the USUHS IRB also approved data collection efforts for another year for all three Prongs of the study.

To date, 300 records have been reviewed for Prong A, the clinical review portion of the study. In July 2011, a team of four accompanied by the principal investigator, reviewed and collected data from 100 substantiated closed neglect cases at Ft. Drum; in August, a team of five travelled to Ft. Stewart (August 2011) and Ft. Bragg (October 2011) to collect data from 100 clinical records at each site. One hundred substantiated closed child neglect records will be reviewed at Ft. Hood in November 2011.

Prong B consists of four components: an in-person questionnaire with ACS staff and participants at the commissary, telephonic questionnaires with ACS and/or other service providers and on-line questionnaires.

With the telephonic data collection (Prong B), 90 interviews were completed primarily with ACS staff and service providers at the installation. The sites for this portion of the study included: Ft. Polk, Ft. Meade, Ft. Carson, Ft. Wainwright, Ft. Irwin, and Ft. Huachuca.

A team of 3-4 project members collected data from voluntary participants visiting the commissary (Prong B) at Ft. Hood, Ft. Bragg and Ft. Drum. A total of 285 questionnaires were completed at these locations by active duty service members and their spouses. At these same installations, questionnaires completed in-person with ACS staff, totaled 246 questionnaires.

Electronic surveys (Prong B) were completed by 168 ACS staff at the following 15 sites: Ft. Benning, Ft. Bliss, Ft. Campbell, Ft. Gordon, Ft. Jackson, Ft. Knox, Ft. Lee, Ft. Leonard Wood, Ft. Riley, Ft. Rucker, Ft. Sam Houston, Ft. Sill, Joint Bases at Lewis McChord and San Antonio, and Shofield Barracks.

For Prong C (community component), research assistants were assigned to the implementation team and we extended the collection and analysis of community variables.

3. **Program staff training:** Staff was trained to collect data for Prongs A (clinical record review) and B (telephonic interviews with ACS personnel). Approximately 10 -15 people were trained to collect data from the closed neglect cases located at four Army sites. Several rounds of clinical record reviewer training were completed to ensure adequate inter-rater reliability between reviewers.

For Prong B, six research assistants were trained to collect data telephonically from six Army sites targeted for the study. Staff was also trained to perform analyses on the data collected.

A research assistant has been assigned the task of reviewing the responses from the online questionnaires; this RA will be responsible for identifying any issues that may affect data quality and/or integrity.

4. **Site approval and planning:** To facilitate the IAIR process between USUHS IRB and Darnall Army Medical Center (BAMC IRB), the principal investigator, Stephen Cozza, met

with the USUHS IRB head to coordinate the process for Prong A which was approved in July 2011. An IAIR was completed with Eisenhower's IRB (Ft. Stewart) and Ft. Hood.

Upon request, a separate IRB protocol was submitted to WOMAC (Ft. Bragg); it provided details about the record review component for this site.

An IRB package was submitted directly to WRAMC (Ft. Drum) requesting a deferral to the USUHS IRB.

The USUHS IRB worked with CIRO to coordinate site approvals at each of the four locations for Prong A. As a result, all of the sites deferred to USUHS and data collection was able to begin.

Each point of contact affiliated with Prongs A and B were updated about the latest developments; thereafter coordination took place to schedule visits to each location for data collection purposes.

Contact was made with Ft. Polk's ACS Director, Pamela Evans to obtain her assistance with gathering names, phone numbers and email addresses of ACS personnel eligible to participate with telephonic interviews for Prong B.

KEY RESEARCH ACCOMPLISHMENTS

- The collection of data from 300 closed and substantiated child neglect records at Ft. Drum, Ft. Stewart and Ft. Bragg for Prong A.
- For Prong B, ninety (90) questionnaires were completed via telephone with Army Community Services (ACS) staff and/or other service providers at six installations (Ft. Polk, Ft. Meade, Ft. Carson, Ft. Wainwright, Ft. Irwin, and Ft. Huachuca);
- A total of 168 electronic questionnaires (Prong B) have been completed by ACS staff affiliated with 15 installations (Ft. Benning, Ft. Bliss, Ft. Campbell, Ft. Gordon, Ft. Jackson, Ft. Knox, Ft. Lee, Ft. Leonard Wood, Ft. Riley, Ft. Rucker, Ft. Sam Houston, Ft. Sill, Joint Bases at Lewis McChord and San Antonio, and Shofield Barracks).
- In-person questionnaires (Prong B) were completed at Ft. Hood, Ft. Bragg, and Ft. Drum, totaling 285 questionnaires from voluntary participants at the commissary and 246 questionnaires with ACS staff.
- A preliminary review of community resources has been completed for Prong C.
- A manuscript about neglect in military families was accepted for publication and is currently in press: Fullerton, C. S., McCarroll, J. E., Feerick, M. M., McKibben, J., Cozza, S., Ursano, R. J. & Child Neglect Workgroup. (In press). Child neglect in Army families: A public health perspective. *Military Medicine*.

REPORTABLE OUTCOMES

None.

CONCLUSION

Significant progress has occurred during year three, with activities initiated with all three Prongs of the study. The program team has coordinated efforts with the appropriate institutional review boards at USUHS and the targeted sites in seeking their approval to collect data for the study. During and after the approval process, contact was initiated and continued with the site coordinators to facilitate the collection of data telephonically, in-person and electronically.

We foresee the following activities for the upcoming period.

- 1. Program Personnel and Hiring:** None anticipated.
- 2. Organization and preparation:** For Prong A (clinical record review); a team of five will travel to the final site (Ft. Hood), to collect data from 100 closed records in November.

To collect data for Prong B (in-person questionnaire, commissary/ACS component), a team of three are planning to travel to Ft. Stewart in November.

Data entry will begin for Prongs A and B.

We will continue to review and identify any issues that may affect data quality and/or integrity for the online questionnaire component (Prong B).

- 3. Program staff training:** None anticipated.
- 4. Site approval and planning:** Coordinating with the site coordinators for the next visits for data collection.

REFERENCES

None

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None

APPENDICES

None